



TACTICAL RESPONSE REPORT/Chicago Police Department

1. DATE OF INCIDENT 10-FEB-2017		TIME 17:54:00		2. ADDRESS OF OCCURRENCE 3958 N WESTERN AVE CHICAGO, IL 60618		3. LOCATION CODE 304		4. BEAT/OCCUR 1921		5. VIDEO RECORDED INCIDENT 01 BWC 02 IN-CAR CAMERA 03 OTHER REPT VIDEO				
MEMBER INVOLVED	6. POSITION 9161		7. LAST NAME STORCE		8. FIRST NAME ANGELA D		9. STAR NO. 9761		10. SEX 01 M 02 F WHI		11. RACE CODE 12. AGE 502		13. HT. 150	
	15. DATE OF APPT 27-NOV-2006		16. EMPLOYEE NO.		17. UNIT & BEAT OF ASSIGNMENT 019 1922		18. DUTY STATUS 01 On 02 Off		19. MEMBER INJURED? 01 Yes 02 No		20. MEMBER IN UNIFORM? 01 Yes 02 No			
SUBJECT INFORMATION	21. LAST NAME DOE		22. FIRST NAME JANE		23. M.I.		24. SEX 01 M 02 F WHI		25. RACE		26. D.O.B.		27. HT.	
	29. ADDRESS CHICAGO, IL		30. TELEPHONE NO.		31. WAS SUBJECT ARMED? OTHER (SPECIFY) 01 Yes 02 No		32. SUBJECT INJURED BY MEMBER? 01 Yes 02 No		33. SUBJECT ALLEGED INJURY BY MEMBER? 01 Yes 02 No					
	34. IF SUBJECT INJURED, DESCRIBE INJURY 01 Fatal 02 Non-Fatal - Major Injury 03 Non-Fatal - Minor Injury 04 Non-Apparent/None		35. WHERE WAS MEDICAL TREATMENT OBTAINED? ILLINOIS MASONIC MEDICAL CENTER		36. BY WHOM? DR KINGSLEY		37. CONDITION 01 Apparently Normal 02 Under Influence 03 Hospitalized 04 Not Hospitalized		38. CHARGES PLACED DNA CB NO. IR NO					
	39. CHARGES PLACED DNA CB NO. IR NO													
REASON FOR USE OF FORCE (Check all that apply)	40. PASSIVE RESISTER		ACTIVE RESISTER		ASSAILANT: ASSAULT		ASSAILANT: BATTERY		ASSAILANT: DEADLY FORCE					
	SUBJECT'S ACTIONS DID NOT FOLLOW VERBAL DIRECTION STIFFENED (DEAD WEIGHT) OTHER		FLED PULLED AWAY OTHER ASSAULTED WITH KNIFE		IMMINENT THREAT OF BATTERY OTHER PERCEIVED AS		ATTACK WITH WEAPON ATTACK WITHOUT WEAPON OTHER		USES FORCE LIKELY TO CAUSE DEATH OR GREAT BODILY HARM WEAPON OTHER PERCEIVED AS					
WEAPON DISCHARGE INCIDENT	MEMBER'S RESPONSE MEMBER PRESENCE VERBAL COMMANDS ESCORT HOLDS WRISTLOCK ARMBAR PRESSURE SENSITIVE AREAS CONTROL INSTRUMENT OC/CHEMICAL WEAPON W/AUTHORIZATION LRAD WITH AUTHORIZATION OTHER		OPEN HAND STRIKE TAKE DOWN / EMERGENCY HANDCUFFING OC CHEMICAL WEAPON CANINE TASER (Probe Discharge) TASER (Contact Stun) TASER (ARC Cycle) TASER (Spark Displayed) OTHER		ELBOW STRIKE CLOSED HAND STRIKE/PUNCH IMPACT WEAPON (Describe in Box 40) OTHER		KNEE STRIKE KICKS IMPACT MUNITION (Describe in Box 40) OTHER		FIREARM OTHER					
	41. *OC/CHEMICAL WEAPON AUTHORIZED BY (NAME)		RANK		STAR NO.		UNIT NO.		42. DID THE INVOLVED MEMBER DISCHARGE A WEAPON ONLY TO DESTROY OR DETER AN ANIMAL? 01 Yes 02 No					
WEAPON DISCHARGE INCIDENT	43. WAS THIS AN ACCIDENTAL DISCHARGE IN THE CONTEXT OF A NON-CRIMINAL INCIDENT? 01 Yes 02 No		44. DID THIS WEAPON CONTRIBUTE TO A SUBJECT INJURY 01 Yes 02 No		45. DID THE DISCHARGE RESULT IN A SELF-INFLICTED INJURY? 01 No 02 Yes - Subject 03 Yes - Member		46. WEAPON TYPE 01 REVOLVER 02 RIFLE 03 SHOTGUN 04 SEMI-AUTO PISTOL 05 CHEMICAL WEAPON 06 TASER (Probe Discharge) 07 OTHER		47. INCIDENT OCCURRED Indoors Outdoors		48. LIGHTING CONDITIONS 01 Daylight 02 Night 03 Dawn 04 Dusk 05 Poor Artificial 06 Good Artificial		49. WEATHER CONDITIONS CLEAR	
	50. MAKE/MANUFACTURER SIG S&W SWISS INDUSTRIAL GESSELLSCHAFT - SZ-		51. MODEL P239		52. BARREL LENGTH 3.60		53. CALIBER/GAUGE 9 MM		54. TASER DART ID NO		55. WEAPON SERIAL NO. (Include Letters) SBU002291		56. CHICAGO GUN REG. NO. R002746S	
	57. IL FIREARM OWNER ID. NO. 56020029		58. HANDGUN CERTIFICATE NO.		59. SPECIAL WEAPON CERTIFICATE NO.		60. PROPERTY INVENTORY NO.		61. TYPE OF AMMUNITION USED Department Issued		62. NO. OF WEAPONS DISCHARGED BY THIS MEMBER 1		63. TOTAL NO. OF SHOTS MEMBER FIRED 1	
	64. WHO FIRED FIRST SHOT 01 MEMBER 02 OFFENDER 03 OTHER (SPECIFY)		65. WAS FIREARM RELOADED DURING INCIDENT 01 YES 02 NO		66. NO. OF CARTRIDGES/SHOT SHELLS RELOADED		67. HOW WAS MEMBER'S HANDGUN WORN 01 RT. SIDE (WAIST) 02 LT. SIDE (WAIST) 03 OTHER (Specify)		68. HOW WAS MEMBER'S HANDGUN DRAWN 01 STRONG SIDE DRAW 02 CROSS DRAW 03 OTHER (Specify)		69. SPECIFY METHOD/EQUIPMENT USED TO RELOAD		70. DID MEMBER USE SIGHTS 01 YES 02 NO	
	71. DESCRIBE PROTECTIVE COVER USED (LIGHT POLES, DOORWAYS, CAR, FURNITURE, ETC) NONE		72. DISTANCE BETWEEN INVOLVED MEMBER & OFFENDER WHEN FIRST SHOT WAS FIRED 01 0 - 05 FT. 02 05 - 10 FT. 03 10 - 15 FT. 04 OVER 15 FT.		73. PERSON/OBJECT STRUCK AS RESULT OF THE DISCHARGE OF MEMBER'S WEAPON 01 SUBJECT 02 OTHER PERSON 03 ANIMAL 04 OBJECT 05 SUBJECT & OTHER CATEGORY 06 UNKNOWN 07 NONE 08 ANY OTHER COMBINATION		74. POSITION OF MEMBER DISCHARGING WEAPON 01 STANDING 02 LYING DOWN 03 SITTING 04 KNEELING 05 OTHER (SPECIFY)		75. EVENT NO. 1704111450		76. R.D. NO. JA149063			

CASE INFORMATION	77 NOTIFICATIONS (ALL INCIDENTS) IMMEDIATE SUPERVISOR DSS OF DISTRICT OF OCCURRENCE NOTIFICATIONS (TASER, OC SPRAY, OTHER CHEMICAL WEAPONS INCIDENT): OEMC <input type="checkbox"/> CPIC NOTIFICATIONS (USE OF DEADLY FORCE, FIREARM, IMPACT MUNITIONS, LRAD, CANINE INCIDENT): <input checked="" type="checkbox"/> OEMC Members will ensure that all required notifications and all witnesses to this use of force are documented in the appropriate case report.			75 EVENT NO 1704111450	
	78 ADDITIONAL INFORMATION OFFENDER ASSAULTED OFFICER WITH KNIFE.				
SIGNATURES	79 REPORTING MEMBER (Print Name) STORCE, ANGELA D 10-FEB-2017 23:47:48		STAR/EMPLOYEE NO. 9761	SIGNATURE 	76 HD NO JA149063
	Reviewing supervisor will ensure the legibility and completeness of this report and attest by entering the required information below.				
	80 REVIEWING SUPERVISOR (Print Name) PEREZ, ANGEL L		STAR NO 1503	SIGNATURE 	

LOG# 1084629

Attachment 24

LIEUTENANT OR ABOVE/INCIDENT COMMANDER REVIEW

FOR REPORTABLE USE OF FORCE INCIDENTS, THE FOLLOWING RANKED SUPERVISOR WILL BE RESPONSIBLE FOR REVIEW AND APPROVAL OF ALL TRRS FROM THE SAME INCIDENT. 1. THE EXEMPT-LEVEL INCIDENT COMMANDER WILL REVIEW AND APPROVE THE FOLLOWING TYPES OF INCIDENTS: (A) * HC DISCHARGE OF IMPACT MUNITIONS OR A FIREARM BY A DEPARTMENT MEMBER, EXCLUDING UNINTENTIONAL DISCHARGES WITH NO INJURY AND DISCHARGES TO DESTROY AN ANIMAL. (B) A MEMBER'S USE OF FORCE BY WHATEVER MEANS, THAT RESULTS IN THE DEATH OR INJURIES LIKELY TO CAUSE DEATH OF ANY INDIVIDUAL. (C) ANY LESSER USE OF FORCE BY A DEPARTMENT MEMBER WHEN THAT USE OF FORCE STEMS FROM THE SAME INCIDENT IN WHICH ANOTHER MEMBER USED FORCE AS STATED ABOVE. 2. THE ASSIGNED DISTRICT OF OCCURRENCE MEMBER THE RANK OF CAPTAIN OR ABOVE WILL REVIEW AND APPROVE TRRS FOR THE FOLLOWING INCIDENTS: (A) THE DESTRUCTION OF AN ANIMAL WITH NO HUMAN INJURY. (B) AN ACCIDENTAL WEAPONS DISCHARGE WITH NO INJURY. (C) ANY INCIDENT NORMALLY INVESTIGATED BY A LIEUTENANT WHERE A LIEUTENANT IN THE DISTRICT OF OCCURRENCE IS NOT AVAILABLE. (3) THE ASSIGNED DISTRICT OF OCCURRENCE MEMBER THE RANK OF LIEUTENANT WILL INVESTIGATE ALL OTHER INCIDENTS.

81. SUBJECT'S STATEMENT REGARDING THE USE OF FORCE
 Deceased DNA REFUSED ☒ INTERVIEW NOT CONDUCTED (Specify Reason)

82. LIEUTENANT OR ABOVE/INCIDENT COMMANDER COMMENTS
 U#17-005
 As of this report no further action by the undersigned is required. Based on the facts available at this time, it is the preliminary finding that Officer Storce acted in compliance with dept policy

83. LIEUTENANT OR ABOVE/INCIDENT COMMANDER USE ONLY <input checked="" type="checkbox"/> I HAVE REVIEWED THIS TRR AND COMPLIED WITH THE DUTIES OUTLINED IN 003-02-05.	84. LIEUTENANT OR ABOVE/INCIDENT COMMANDER DETERMINATION <input checked="" type="checkbox"/> INDEPENDENT POLICE REVIEW AUTHORITY (IPRA) NOTIFIED. <input type="checkbox"/> LOG NO. <u>1084029</u> OBTAINED
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85. LIEUTENANT OR ABOVE/INCIDENT COMMANDER (Print Name) PENA, MARIA C	86 TRR _____ OF _____ TRR(S)
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87. DISTRIBUTION OF TRR:
 IF A PAPER TRR WAS COMPLETED DUE TO AN UNAVAILABILITY OF THE AUTOMATED TACTICAL RESPONSE REPORT APPLICATION:

1. THE ORIGINAL TRR WILL BE FORWARDED TO DIRECTOR, RECORDS DIVISION TO BE INCLUDED WITH THE CORRESPONDING CASE FILE.
2. A COPY OF THE PAPER TRR WILL BE FORWARDED TO:
 - A. INDEPENDENT POLICE REVIEW AUTHORITY, AND
 - B. COMMANDER, INFORMATION SERVICES DIVISION, TO ENSURE DATA ENTRY INTO THE AUTOMATED TACTICAL RESPONSE REPORT APPLICATION.

SIGNATURE 	DATE COMPLETED TIME 11-FEB-2017 00:11:39
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